## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

AREDOOS

| •   |                    |   | SMALL ENTITY TYPE  |                       |                              | OTHER THAN<br>OR SMALL ENTITY |            |                          |                        |    |                       |                        |
|---|--------------------|---|--------------------|-----------------------|------------------------------|-------------------------------|------------|--------------------------|------------------------|----|-----------------------|------------------------|
| TOTAL CLAIMS  |                    |   | 30                 |                       |                              |                               | Γ          | RATE                     | FEE                    |    | RATE                  | FEE                    |
| FO  | R                  |   | NUMBER FILED       |                       | NUMBER EXTRA                 |                               | B          | BASIC FEE                | 355.00                 | OR | BASIC FEE             | 710.00                 |
| то  | TAL CHARGEA        | BLE CLAIMS                                | ろい minus 20=       |                       | · 10                         |                               |            | X\$ 9=                   | 90.0                   | OR | X\$18=                |                        |
| IND   | EPENDENT CL        | AIMS                                      | <i>(</i> minus 3 = |                       | * 3                          |                               |            | X40=                     | 1200                   | OR | X80=                  |                        |
| MU  | LTIPLE DEPEN       | DENT CLAIM P                              | RESENT             |                       | _                            |                               |            | +135=                    | - W                    | OR | +270=                 |                        |
| * If the difference in column 1 is less than zero, ente |                    |   |                    |                       | r "0" in c                   | olumn 2                       | L          | TOTAL                    | 565.4                  | OR | TOTAL                 |                        |
| <b>CLAIMS AS AMENDED - PART II</b>                      |                    |   |                    |                       |                              |                               |            |                          |                        | Ĭ  | OTHER                 |                        |
|   |                    | (Column 1)                                | (Colum             |                       |                              |                               | _          | SMALL E                  |                        | OR | SMALL                 |                        |
| AMENDMENT A   |                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | A STATE OF         | NUM<br>PREVIO<br>PAID | BER<br>OUSLY                 | PRESENT<br>EXTRA              |            | RATE                     | ADDI-<br>TIONAL<br>FEE |    | RATE                  | ADDI-<br>TIONAL<br>FEE |
|   | Total              | *   | Minus              | **                    |                              | =                             |            | X\$ 9=                   |                        | OR | X\$18=                |                        |
|   | Independent        | *<br>NTATION OF M                         | Minus              | ***                   | T CL AINA                    | ]=                            |            | X40=                     |                        | OR | X80=                  |                        |
| <u> </u>  | rino i Pricoc      | NIATION OF MI                             | JUITPLE DEF        | ENDEN                 | CLAIM                        |                               |            | +135=                    |                        | OR | +270=                 |                        |
|   | TOTAL              |   |                    |                       |                              |                               |            |                          |                        | OR | TOTAL                 |                        |
|   |                    | Al  | DDIT. FEE          |                       | ۱۳۰۰                         | ADDIT. FEE                    |            |                          |                        |    |                       |                        |
|   |                    | (Column 1)<br>CLAIMS                      |                    |                       | IEST                         | (Column 3)                    | Г          | 1                        | ADDI-                  |    |                       | ADDI-                  |
| AMENDMENT B   | ·                  | REMAINING<br>AFTER<br>AMENDMENT           |                    | PREVI                 | IBER<br>OUSLY<br>FOR         | PRESENT<br>EXTRA              |            | RATE                     | TIONAL<br>FEE          |    | RATE                  | TIONAL<br>FEE          |
|   | Total              | *   | Minus              | **                    |                              | =                             |            | X\$ 9=                   |                        | OR | X\$18=                |                        |
|   | Independent        | *   | Minus              | ***                   | T OL ALLA                    | =                             |            | X40=                     |                        | OR | X80=                  |                        |
|   | FIRST PRESE        | NTATION OF M                              | JUNPLE DEF         | ENDEN                 | CLAIM                        |                               |            | +135=                    |                        | OR | +270=                 |                        |
| Ti<br>ADDIT   |                    |   |                    |                       |                              |                               |            |                          |                        | OR | TOTAL<br>ADDIT. FEE   |                        |
|   |                    | (Column 1)                                |                    | (Colu                 | mn 2)                        | (Column 3)                    |            | DD11.1 CL •              |                        | •  | ADDIT: 1 EE           |                        |
| AMENDMENT C   |                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                    | PREVI                 | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA              |            | RATE                     | ADDI-<br>TIONAL<br>FEE |    | RATE                  | ADDI-<br>TIONAL<br>FEE |
|   | Total              | *   | Minus              | **                    |                              | =                             |            | X\$ 9=                   |                        | OR | X\$18=                |                        |
|   | Independent        | *<br>NTATION OF M                         | Minus              | ***                   | T CL AIM                     | =                             |            | X40=                     |                        | OR | X80=                  |                        |
| <u> </u>  | I INST PRESE       | INTATION OF M                             | OLITE DE           | CINDEIN               | CLAIIVI                      |                               |            | +135=                    |                        | OR | +270=                 |                        |
|   |                    | mn 1 is less than t<br>mber Previously P  |                    |                       |                              |                               | ़ <b>∟</b> | TOTAL                    |                        | ΛD | TOTAL                 |                        |
| ***   | If the "Highest Nu | mber Previously Pather Previously Pa      | aid For" IN THI    | S SPACE               | is less tha                  | an 3, enter "3."              | ^_         | DDIT. FEE L d in the app | ropriate box           |    | ADDIT. FEE<br>lumn 1. |                        |